

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL						
OMB Number: 3235-0076						
Expires:						
Estimated average burden						
hours per respons	se16.00					

SEC USE ONLY						
Prefix		Serial				
1	1					
DATE RECEIVED						
1						

UNIFORM LIMITED OFFERING EX	EMPTION
Name of Offering (check if this is an amendment and name has changed, and indicate change)
Sale of Convertible Promissory Notes	- 180
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	n 4(6) ULOE
Type of Filing:	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	07085333
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	///////////////////////////////////////
Bright View Technologies, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Co	ode) Telephone Number (Including Area Code)
5151 McCrimmon Parkway, Suite 200, Morrisville, NC 27560	919 228-4370
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	ode) Telephone Number (Including Area Code)
Brief Description of Business	
Research and development of video technology.	
	PPOCTOOT
Type of Business Organization	LIOCESSED
	ther (please specify):
business trust limited partnership, to be formed	MAY 3 0 2007
Month Year	
Actual or Estimated Date of Incorporation or Organization: 016 012 Actual C	State: THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	
or for canada, 111 to: one for for garage justice from	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ✓ Beneficial Owner Executive Officer Check Box(es) that Apply; General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Teague, W. E. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bright View Technologies, Inc., 5151 McCirmmon Parkway, Suite 200, Morrisville, NC 27560 Check Box(es) that Apply: Promoter ✓ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Reed, David L. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bright View Technologies, Inc., 5151 McCirmmon Parkway, Suite 200, Morrisville, NC 27560 Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Fadel, Edward Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bright View Technologies, Inc., 5151 McCirmmon Parkway, Suite 200, Morrisville, NC 27560 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer / Director General and/or Managing Partner Full Name (Last name first, if individual) Gannon, Jeffrey P. Business or Residence Address (Number and Street, City, State, Zip Code) 811 Woodstream Court, Lake Forest, IL 60045 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ✓ Director General and/or Managing Partner Full Name (Last name first, if individual) Jones, Morgan Business or Residence Address (Number and Street, City, State, Zip Code) c/o Battery Ventures, 930 Winter Street, Suite 2500, Waltham, MA 02451 Promoter Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Tucker, Todd Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bright View Technologies, Inc., 5151 McCirmmon Parkway, Suite 200, Morrisville, NC 27560 Check Box(es) that Apply; Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Battery Ventures VI, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 930 Winter Street, Suite 2500, Waltham, MA 02451

A. BASIC IDENTIFICATION DATA

A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner Director Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) **Duke University** Business or Residence Address (Number and Street, City, State, Zip Code) Office of Science & Technology, 454 Davison Bldg., Trent Road, Durham, NC 27710 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING												
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							Yes	No X					
2.									§_9,775.00				
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3. 4			permit join									R	
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	li Name (l	Last name	first, if indi	ividual)							-		
Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	ip Code)			<u> </u>			
Na	me of Ass	sociated Bi	oker or De	aler									,
Sta	ites in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)				*************	***************************************	***************************************	☐ All	States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	Il Name (Last name	first, if ind	ividual)	·								
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)				.=		· · · · · · · · · · · · · · · · · · ·
Na	me of Ass	sociated B	roker or De	aler				-					·
Sta			Listed Has							_			
	(Check	"All State:	s" or check	individual	States)		***************************************				***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				_		
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							☐ Al	l States					
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity	s	s
	Common Preferred		4 000 000 00
	Convertible Securities (including warrants)	\$_4,000,000.00	4,000,000.00 \$
	Partnership Interests		
	Other (Specify)	\$	\$
	Total	\$ 4,000,000.00	\$ 4,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	!	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	12	\$ 4,000,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	:	<u> </u>
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s
	Legal Fees	Z	\$ 10,000.00
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	\$
	Total		s 10,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF PR	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			\$
5.	Indicate below the amount of the adjusted gross pre- each of the purposes shown. If the amount for ar check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Par-			
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$ _	
	Purchase of real estate] \$	
	Purchase, rental or leasing and installation of mad and equipment	chinery] \$	s
	Construction or leasing of plant buildings and fac-	ilities]\$	s
	Acquisition of other businesses (including the val offering that may be used in exchange for the assi issuer pursuant to a merger)	1\$		
	- ·			
	• •			
] \$	s
	Column Totals] \$ <u>0.00</u>	Z \$ 3,990,000.00
	Total Payments Listed (column totals added)			990,000.00
		D. FEDERAL SIGNATURE		,
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	mish to the U.S. Securities and Exchange Commiss	ion, upon writte	
lss	uer (Print or Type)	Signature	ate	
В	right View Technologies, Inc.	IN 2. Clan - IN	May/ <i>o</i> , 2007	
Nu	me of Signer (Print or Type)	Title of Signer (Print or Type)		
W.	E. Teague	President and Chief Executive Officer		

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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001,)